Under the Paperwork Reduction Act of	U.S. Pai d to respond to a collec	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERC respond to a collection of information unless it displays a valid OMB control number					
Effective on 12/0		Complete if Known					
Fees pursuant to the Consolidated Appro	 Application N 	Application Number (09/674,092-Conf. #1549			
FEE TRANS	Filing Date	Filing Date Februa		ary 27, 2001			
For FY 2	First Named I	First Named Inventor Mai		farcus KEEP			
	Examiner Nan	Examiner Name A. A. Moha		ıd			
X Applicant claims small entity sta	Art Unit	Art Unit 165		354			
TOTAL AMOUNT OF PAYMENT	Attomey Dock	Attorney Docket No. 0030-0200P					
METHOD OF PAYMENT (check	call that apply)						
Check Credit Card	Money Order	None Othe	r (please identif	y):			
x Deposit Account Deposit Account	Number: 02-244	8 Depo	sit Account Name	Birch, Stewa	art, Kolaso	ch & Birch,	
For the above-identified dep	osit account, the Direct	or is hereby author	ized to: (chec	k all that apply)			
x Charge fee(s) indicate	d below	Cha	rge fee(s) ind	licated below, e	xcept for t	the filing fee	
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES						
F		SEARCH FEES		ATION FEES			
Application Type Fee (\$ Small Entity \$) Fee (\$) Fee	Small Entity (\$) Fee (\$)	Y Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)	
Utility 300		00 250	200	100		- 414 (47	
Design 200	100 1	00 50	130	65			
Plant 200	100 3	00 150	160	80			
Reissue 300	150 5	00 250	600	300			
Provisional 200	100	0 0	0	0			
2. EXCESS CLAIM FEES						Small Entity	
Fee Description					Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)					50	25	
Each independent claim over 3 (including Reissues) Multiple dependent claims					200	100	
	F (4) F	- B-11 (A)			360	180	
		0.00			Fee Paid (\$)		
HP = highest number of total claims paid fo		0.00	Fee) (\$) I	ee Paid (ภ	
Indep. Claims Extra Claims		ee Paid (\$)				_	
3 -8= 0	× 100.00 =	0.00					
HP = highest number of independent claim	s paid for, if greater than 3.						
3. APPLICATION SIZE FEE							
If the specification and drawings e listings under 37 CFR 1.52(e)),						0	
sheets or fraction thereof. See				iity) for each ac	iditional 3	U	
Total Sheets Extra Shee	() () ()	h additional 50 or fr		Fee (\$)	Fee	Paid (\$)	
- 100 =	/50 =	(round up to a wi	hole number) >				
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2252 Extension for response within second month 225.00							
SUBMITTED BY							
Signature mod N	20	Registration No. (Attorney/Agent)	36,623	Telephone	phone (858) 356-5959		
Name (Print/Type) Mark J. Nuell				Date September 5, 2007			